

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8/24/05</u>		2 Serial/Patent # <u>10/528989</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 50.00							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
Overpayment		Credit Deposit A/C #:									
Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td>0</td><td>2</td><td>--</td><td>2</td><td>4</td><td>4</td><td>8</td> </tr> </table>			0	2	--	2	4	4	8
0	2	--	2	4	4	8					
No Fee Due (Explanation):											
Fee Code Correction											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>BAC</u>		TITLE: _____									
SIGNATURE: <u>BAC</u>		PHONE: _____									
OFFICE: <u>PCT/DO/EO</u>		<small>Repln. Ref: 08/24/2005 BCAMPBEL 0013331000</small> <small>RRB# 2440 App# Number: 10528989</small> <small>PT# 9204 ***** \$50.00 CR *****</small>									
THIS SPACE RESERVED FOR FINANCE USE ONLY:											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: